

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002626

FILED
Apr 27, 2009
Secretary of State

Entity Name: OPAL SEAS OCEANFRONT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

275 HWY. A1A
SATELLITE BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

275 HWY. A1A
SATELLITE BEACH, FL 32937

New Mailing Address:

FEI Number: 01-0661949

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOILEAU, JOHN
1470 MICHIGAN AVE. BLDG. C
COCOA, FL 32923 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAW, JOHN
Address: 275 HWY A1A #601
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete
Name: MERCHANT, RICHARD
Address: 275 HWY A1A, #603
City-St-Zip: SATELLITE BEACH, FL 32937

Title: SD () Delete
Name: BABCOCK, GLEN
Address: 8403 RIVER MEADOW DR
City-St-Zip: FREDERICK, MD 21704

Title: VPD () Delete
Name: HORTON, JOHN
Address: 275 HWY A1A #202
City-St-Zip: SATELLITE BEACH, FL 32937

Title: TD () Delete
Name: ASHE, DON
Address: 1670 TALLAPOOSA DR
City-St-Zip: GENEVA, FL 32732

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: DRENNON, JAKE
Address: P O BOX 1718
City-St-Zip: TITUSVILLE, FL 32781

Title: D (X) Change () Addition
Name: BABCOCK, GLEN
Address: 275 HIGHWAY A1A UNIT 302
City-St-Zip: SATELLITE BEACH, FL 32937

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ASHE, DON
Address: 1670 TALLAPOOSA DR
City-St-Zip: GENEVA, FL 32732

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN LAW

PD

04/27/2009

Electronic Signature of Signing Officer or Director

Date